

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT** ▼Example: If typing, type
over the lines

STRAIGHT TALK AMERICA

ADDRESS (number and street)

PO Box 9785

☐Check if different
than previously
reported. (ACC)

ALEXANDRIA

VA

22304

2. **FEC IDENTIFICATION NUMBER** ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00413245

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☒

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

06

01

2007

through

06

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Keith Davis

Signature of Treasurer

Electronically Filed by Keith Davis

Date

07

20

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							
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FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
STRAIGHT TALK AMERICA

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	6	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2007		33386.58
(b) Cash on Hand at Beginning of Reporting Period	7884.55	
(c) Total Receipts (from Line 19)	10083.00	98888.39
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	17967.55	132274.97
7. Total Disbursements (from Line 31)	2656.79	116964.21
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	15310.76	15310.76
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	10525.86	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	215133.97	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

STRAIGHT TALK AMERICA

Report Covering the Period:

From:

M M
0 6D D
0 1Y Y Y Y
2 0 0 7

To:

M M
0 6D D
3 0Y Y Y Y
2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	54000.00
(i) Itemized (use Schedule A)	83.00	2687.38
(ii) Unitemized	83.00	56687.38
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	10000.00	25000.00
(c) Other Political Committees (such as PACs)	10083.00	81687.38
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5)		
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	9.60
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	17191.41
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10083.00	98888.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10083.00	98888.39

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	9906.79	134614.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	9906.79	134614.21
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	-7500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	100.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	100.00
29. Other Disbursements.....	-7250.00	-10250.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	2656.79	116964.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	2656.79	116964.21

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	10083.00	81687.38
34. Total Contribution Refunds (from Line 28(d))	0.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10083.00	81587.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9906.79	134614.21
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	9.60
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9906.79	134604.61

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial)
COMMERCE, HOPE, INNOVATION & PROGRESS PAC

Mailing Address **8580 Beaverwood Drive**

City State Zip Code
Germantown TN 38138

FEC ID number of contributing
federal political committee.

C C00427286

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 2 7 2 0 0 7

Transaction ID: SA11C.97517

Amount of Each Receipt this Period

5000.00

Contribution

B. Full Name (Last, First, Middle Initial)
SCIENCE APPLICATIONS INTERNATIONAL CORPORATION VOLUNTARY POLITICAL ACTION COMMITTEE

Mailing Address **10260 Campus Point Dr**
F2

City State Zip Code
San Diego CA 92121

FEC ID number of contributing
federal political committee.

C C00300418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 6 2 8 2 0 0 7

Transaction ID: SA11C.97510

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

10000.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement

Merchant Fees

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97467

Date of Disbursement

06 / 21 / 2007

Amount of Each Disbursement this Period

180.00

Full Name (Last, First, Middle Initial)

B. American Express

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement

Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97468

Date of Disbursement

06 / 21 / 2007

Amount of Each Disbursement this Period

19.00

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 1270

City Newark State NJ Zip Code 07101-1270

Purpose of Disbursement

Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97473

Date of Disbursement

06 / 21 / 2007

Amount of Each Disbursement this Period

75.50

SUBTOTAL of Disbursements This Page (optional)

274.50

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. US Postal Service

Mailing Address 1100 Wythe Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97473.0

Date of Disbursement

06 / 21 / 2007

Amount of Each Disbursement this Period

75.50

[MEMO ITEM]

B. Care First Blue Cross Blue Shield

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279

Purpose of Disbursement
Health Insurance

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97462

Date of Disbursement

06 / 21 / 2007

Amount of Each Disbursement this Period

460.00

C. David Denton

Mailing Address PO Box 203636

City New Haven State CT Zip Code 06520

Purpose of Disbursement
Check Voided/Originally issued 5/31/06

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97491

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-126.00

SUBTOTAL of Disbursements This Page (optional)

334.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Mini U Storage

Mailing Address 500 S. Pickett Street

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
Storage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97460

Date of Disbursement

06 / 05 / 2007

Amount of Each Disbursement this Period

119.00

Full Name (Last, First, Middle Initial)

B. National City Bank

Mailing Address PO Box 5756

City Akron State OH Zip Code 44101

Purpose of Disbursement
Bank Charges

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97478

Date of Disbursement

06 / 20 / 2007

Amount of Each Disbursement this Period

43.34

Full Name (Last, First, Middle Initial)

C. Paychex

Mailing Address 7450 Tilghman St., Ste. 107

City Allentown State PA Zip Code 18106-9037

Purpose of Disbursement
Payroll Service

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97459

Date of Disbursement

06 / 11 / 2007

Amount of Each Disbursement this Period

97.07

SUBTOTAL of Disbursements This Page (optional)

259.41

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Southwest Publishing and Mailing Corp.

Mailing Address 2600 NW Topeka Blvd.

City Topeka State KS Zip Code 66617

Purpose of Disbursement
Direct Mail-Postage/Production

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97470

Date of Disbursement

06 / 21 / 2007

Amount of Each Disbursement this Period

8540.69

Full Name (Last, First, Middle Initial)

B. Sprint PCS

Mailing Address PO Box 1769

City Newark State NJ Zip Code 07101-1769

Purpose of Disbursement
Telephone-Cellular

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97465

Date of Disbursement

06 / 21 / 2007

Amount of Each Disbursement this Period

76.33

Full Name (Last, First, Middle Initial)

C. US Postal Service

Mailing Address 1100 Wythe Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Postage

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.97469

Date of Disbursement

06 / 21 / 2007

Amount of Each Disbursement this Period

118.00

SUBTOTAL of Disbursements This Page (optional)

8735.02

TOTAL This Period (last page this line number only)

9602.93

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Autauga County Republican Party

Mailing Address 1417 Indian Hill Road

City Prattville State AL Zip Code 36067

Purpose of Disbursement
Check Voided/Originally issued 6/13/06

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.97492

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-500.00

Full Name (Last, First, Middle Initial)

B. Conecuh County Republican Party

Mailing Address Rt. 36, Box 274

City Evergreen State AL Zip Code 36401

Purpose of Disbursement
Check Voided/Originally issued 6/13/06

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.97493

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-500.00

Full Name (Last, First, Middle Initial)

C. Covington County Republican Party

Mailing Address 1030 Three Notch Court

City Andalusia State AL Zip Code 36420

Purpose of Disbursement
Check Voided/Originally issued 6/13/06

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.97494

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-500.00

SUBTOTAL of Disbursements This Page (optional)

-1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Greenwood County GOP

Mailing Address 1610-B Calhoun Rd.

City Greenwood State SC Zip Code 29649

Purpose of Disbursement
Check Voided/Originally issued 6/29/06

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.97502

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-500.00

Full Name (Last, First, Middle Initial)

B. Hale County Republican Party

Mailing Address 1692 Hubbard Road

City Greensboro State AL Zip Code 36744

Purpose of Disbursement
Check Voided/Originally issued 6/13/06

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.97495

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-500.00

Full Name (Last, First, Middle Initial)

C. Lawrence County Republican Party

Mailing Address 147 Main Street

City Moulton State AL Zip Code 35650

Purpose of Disbursement
Check Voided/Originally issued 6/13/06

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.97496

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-500.00

SUBTOTAL of Disbursements This Page (optional)

-1500.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Lee Republican Executive Committee		Transaction ID: SB29.97489 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 313 Carter Street		Amount of Each Disbursement this Period <div>-500.00</div>
City Opelika State AL Zip Code 36801		
Purpose of Disbursement Check Voided/Originally issued 5/1/06	<div>001</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Lowndes County Republican Party		Transaction ID: SB29.97497 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 7</div> </div>
Mailing Address PO Box 389		Amount of Each Disbursement this Period <div>-500.00</div>
City Ft. Deposit State AL Zip Code 36032		
Purpose of Disbursement Check Voided/Originally issued 6/13/06	<div>011</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Lucas for State House		Transaction ID: SB29.97506 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 7</div> </div>
Mailing Address 2856 Kellytown Road		Amount of Each Disbursement this Period <div>-250.00</div>
City Hartsville State SC Zip Code 29550		
Purpose of Disbursement Check Voided/Originally issued 6/29/06	<div>011</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
SUBTOTAL of Disbursements This Page (optional)		<div>-1250.00</div>
TOTAL This Period (last page this line number only)		

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

Full Name (Last, First, Middle Initial)

A. Marion County Republican Party

Mailing Address PO Drawer 1945

City Hamilton State AL Zip Code 35570

Purpose of Disbursement
Check Voided/Originally issued 6/13/06

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.97498

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-500.00

Full Name (Last, First, Middle Initial)

B. Pickens County GOP

Mailing Address 106 Hyde Lane

City Clemson State SC Zip Code 29631

Purpose of Disbursement
Check Voided/Originally issued 6/29/06

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.97504

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

C. Southern Beaufort County GOP Women

Mailing Address 88 South Port Royal Drive

City Hilton Head Island State SC Zip Code 29928

Purpose of Disbursement
Check Voided/Originally issued 6/29/06

Candidate Name

011
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.97505

Date of Disbursement

06 / 30 / 2007

Amount of Each Disbursement this Period

-500.00

SUBTOTAL of Disbursements This Page (optional)

-2000.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 29

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) Steve Clouse Campaign		Transaction ID: SB29.97499 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 7</div> </div>
Mailing Address PO Box 818		Amount of Each Disbursement this Period <div>-500.00</div>
City Ozark State AL Zip Code 36361		
Purpose of Disbursement Check Voided/Originally issued 6/13/06	<div>011</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Sumter County Republican Party		Transaction ID: SB29.97501 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 0 7</div> </div>
Mailing Address PO Box 671		Amount of Each Disbursement this Period <div>-500.00</div>
City Livingston State AL Zip Code 35470		
Purpose of Disbursement Check Voided/Originally issued 6/13/06	<div>011</div> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

-1000.00

TOTAL This Period (last page this line number only) ►

-7250.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☒ 9
☐ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
HEATHER WILSON FOR CONGRESSNature of Debt (Purpose):
Travel - Airfare and Lodg-
ing

Mailing Address PO Box 14070

City State ZIP Code
Albuquerque NM 87191

Outstanding Balance Beginning This Period

454.80

Transaction ID: SD9.96368

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

454.80

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Karen Floyd 2006 CampaignNature of Debt (Purpose):
Travel-Airfare

Mailing Address 113 West Main Street

City State ZIP Code
Spartanburg SC 29306

Outstanding Balance Beginning This Period

791.23

Transaction ID: SD9.96364

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

791.23

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MIKE DEWINE FOR US SENATENature of Debt (Purpose):
Travel-Airfare

Mailing Address PO Box 340188

City State ZIP Code
Columbus OH 43234

Outstanding Balance Beginning This Period

9279.83

Transaction ID: SD9.96363

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9279.83

1) SUBTOTALS This Period This Page (optional).....

10525.86

2) TOTALS This Period (last page this line number only).....

10525.86

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 / 29

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
American ExpressNature of Debt (Purpose):
Research Services (Disput-
ed Charge)

Mailing Address PO Box 1270

City State ZIP Code
Newark NJ 07101-1270

Outstanding Balance Beginning This Period

199.00

Transaction ID: SD10.97416

Amount Incurred This Period

0.00

Payment This Period

199.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Campaign SolutionsNature of Debt (Purpose):
Website Expense

Mailing Address 118 North Saint Asaph St.

City State ZIP Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

62.18

Transaction ID: SD10.97432

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

62.18

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Caplin & DrysdaleNature of Debt (Purpose):
Consultant-Legal

Mailing Address One Thomas Circle, NW Ste. 1100

City State ZIP Code
Washington DC 20005

Outstanding Balance Beginning This Period

3006.40

Transaction ID: SD10.97158

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3006.40

1) SUBTOTALS This Period This Page (optional).....

3068.58

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Caplin & DrysdaleNature of Debt (Purpose):
Consulting-Legal

Mailing Address One Thomas Circle, NW Ste. 1100

City State ZIP Code
Washington DC 20005

Outstanding Balance Beginning This Period

1017.91

Transaction ID: SD10.97383

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1017.91

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Caplin & DrysdaleNature of Debt (Purpose):
Consultant-Legal

Mailing Address One Thomas Circle, NW Ste. 1100

City State ZIP Code
Washington DC 20005

Outstanding Balance Beginning This Period

37.00

Transaction ID: SD10.97376

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

37.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Caplin & DrysdaleNature of Debt (Purpose):
Consultant-Legal

Mailing Address One Thomas Circle, NW Ste. 1100

City State ZIP Code
Washington DC 20005

Outstanding Balance Beginning This Period

630.00

Transaction ID: SD10.97441

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

630.00

1) SUBTOTALS This Period This Page (optional).....

1684.91

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Connell Donatelli, Inc.Nature of Debt (Purpose):
Email List Purchase

Mailing Address PO Box 1877

City State ZIP Code
Alexandria VA 22313

Outstanding Balance Beginning This Period

6725.00

Transaction ID: SD10.97377

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6725.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Huckaby Davis LiskerNature of Debt (Purpose):
Consulting-Compliance

Mailing Address 228 S. Washington St., Suite 115

City State ZIP Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

2014.67

Transaction ID: SD10.97380

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2014.67

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Huckaby Davis LiskerNature of Debt (Purpose):
Compliance Consultant

Mailing Address 228 S. Washington St., Suite 115

City State ZIP Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD10.97435

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

1) SUBTOTALS This Period This Page (optional).....

9739.67

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Huckaby Davis LiskerNature of Debt (Purpose):
Compliance Consultant

Mailing Address 228 S. Washington St., Suite 115

City State ZIP Code
Alexandria VA 22314

Outstanding Balance Beginning This Period

1000.00

Transaction ID: SD10.97424

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
IDMINature of Debt (Purpose):
Database File Maintenance

Mailing Address 490 White Pond Drive

City State ZIP Code
Akron OH 44320

Outstanding Balance Beginning This Period

2972.77

Transaction ID: SD10.97381

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2972.77

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
IDMINature of Debt (Purpose):
Database File Maintenance

Mailing Address 490 White Pond Drive

City State ZIP Code
Akron OH 44320

Outstanding Balance Beginning This Period

140.00

Transaction ID: SD10.97427

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

140.00

1) SUBTOTALS This Period This Page (optional).....

4112.77

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
IDMINature of Debt (Purpose):
Database File Maintenance

Mailing Address 490 White Pond Drive

City State ZIP Code
Akron OH 44320

Outstanding Balance Beginning This Period

50052.14

Transaction ID: SD10.97426

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50052.14

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
IDMINature of Debt (Purpose):
Database File Maintenance

Mailing Address 490 White Pond Drive

City State ZIP Code
Akron OH 44320

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.97479

Amount Incurred This Period

140.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

140.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
IDMINature of Debt (Purpose):
Database File Maintenance

Mailing Address 490 White Pond Drive

City State ZIP Code
Akron OH 44320

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.97484

Amount Incurred This Period

720.34

Payment This Period

0.00

Outstanding Balance at Close of This Period

720.34

1) SUBTOTALS This Period This Page (optional).....

50912.48

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Courtney NahigianNature of Debt (Purpose):
Salary

Mailing Address 331 Cameron Station Blvd.

City State ZIP Code
Alexandria VA 22304

Outstanding Balance Beginning This Period

3201.90

Transaction ID: SD10.97423

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3201.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Courtney NahigianNature of Debt (Purpose):
Salary

Mailing Address 331 Cameron Station Blvd.

City State ZIP Code
Alexandria VA 22304

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.97485

Amount Incurred This Period

3201.90

Payment This Period

0.00

Outstanding Balance at Close of This Period

3201.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Paula Y. Edwards, CPANature of Debt (Purpose):
Consulting-ComplianceMailing Address 1200 G Street, N.W.
Suite 800City State ZIP Code
Washington DC 20005

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.97480

Amount Incurred This Period

1225.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1225.00

1) SUBTOTALS This Period This Page (optional).....

7628.80

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 23 / 29

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Paychex

Nature of Debt (Purpose):
Employer Contribution Pay-
roll Taxes

Mailing Address 7450 Tilghman St., Ste. 107

City State ZIP Code
Allentown PA 18106-9037

Outstanding Balance Beginning This Period

1642.35

Transaction ID: SD10.97428

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1642.35

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Paychex

Nature of Debt (Purpose):
Employer Contribution Pay-
roll Taxes

Mailing Address 7450 Tilghman St., Ste. 107

City State ZIP Code
Allentown PA 18106-9037

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.97481

Amount Incurred This Period

1642.35

Payment This Period

0.00

Outstanding Balance at Close of This Period

1642.35

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Richard Quinn & Associates

Nature of Debt (Purpose):
Consultant-Polling

Mailing Address 1600 Gervais Street

City State ZIP Code
Columbia SC 29201

Outstanding Balance Beginning This Period

26725.00

Transaction ID: SD10.97204

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

26725.00

1) **SUBTOTALS** This Period This Page (optional).....

30009.70

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 24 / 29

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Southwest Publishing and Mailing Corp.Nature of Debt (Purpose):
Direct Mail-Postage/Produ-
ction

Mailing Address 2600 NW Topeka Blvd.

City State ZIP Code
Topeka KS 66617

Outstanding Balance Beginning This Period

65843.20

Transaction ID: SD10.86868

Amount Incurred This Period

0.00

Payment This Period

8540.69

Outstanding Balance at Close of This Period

57302.51

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Southwest Publishing and Mailing Corp.Nature of Debt (Purpose):
Direct Mail-Postage/Produ-
ction

Mailing Address 2600 NW Topeka Blvd.

City State ZIP Code
Topeka KS 66617

Outstanding Balance Beginning This Period

16648.18

Transaction ID: SD10.96351

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

16648.18

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Southwest Publishing and Mailing Corp.Nature of Debt (Purpose):
Direct Mail-Postage/Produ-
ction

Mailing Address 2600 NW Topeka Blvd.

City State ZIP Code
Topeka KS 66617

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.97482

Amount Incurred This Period

9770.77

Payment This Period

0.00

Outstanding Balance at Close of This Period

9770.77

1) SUBTOTALS This Period This Page (optional).....

83721.46

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic TelecommunicationsNature of Debt (Purpose):
Telemarketing

Mailing Address 7591 9th Street North

City State ZIP Code
Oakdale MN 55128

Outstanding Balance Beginning This Period

20822.60

Transaction ID: SD10.96353

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20822.60

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Strategic TelecommunicationsNature of Debt (Purpose):
Telemarketing

Mailing Address 7591 9th Street North

City State ZIP Code
Oakdale MN 55128

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.97483

Amount Incurred This Period

2233.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2233.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
T&M Protection ResourcesNature of Debt (Purpose):
Security

Mailing Address 42 Broadway, Ste. 1630

City State ZIP Code
New York NY 10004

Outstanding Balance Beginning This Period

1200.00

Transaction ID: SD10.97161

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1200.00

1) SUBTOTALS This Period This Page (optional).....

24255.60

2) TOTALS This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)

<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
STRAIGHT TALK AMERICA

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
US Postal Service

Nature of Debt (Purpose):
Postage

Mailing Address 1100 Wythe Street

City	State	ZIP Code
Alexandria	VA	22314

Outstanding Balance Beginning This Period

118.00

Transaction ID: SD10.97430

Amount Incurred This Period

0.00

Payment This Period

118.00

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional).....

0.00

2) TOTALS This Period (last page this line number only).....

215133.97

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

Form/Schedule: **F3XN**

Transaction ID:

The Committee wishes to disclose the following: 1) No expenditures disclosed on Schedule B, Line 21b were made on behalf of any specifically identified federal candidate. All expenditures made on behalf of a specifically identified federal candidate have been disclosed on Schedule B, Line 23. 11 CFR 104.3 (b) and 106.1 2) No expenditures disclosed on Schedule B, Line 21b were made for public communications (as defined by 11 CFR 100.26) or voter drive activity (under 11 CFR 106.6(b)(2)(i)) containing express advocacy as defined under 11 CFR 100.-22 and thus did not constitute in-kind contributions or independent expenditures. 3) The committee has reviewed all travel and subsistence expenditures, and reviewed the reporting requirements outlined at 11 CFR 104.9 and in the instructions for Schedule B. There is no further itemization required under any Commission regulation for these expenditures.

Form/Schedule: **SB21B** Ultimate Vendor - American Express Merchant Services

Transaction ID: **SB21B.97467**

Image# 27930995391

Form/Schedule: **SB21B** Ultimate Vendor - US Postal Service, 1100 Wythe Street, Alexandria, VA 22314
Transaction ID: **SB21B.97468**

Form/Schedule: **SB21B** Ultimate Vendor - American Express Merchant Services, PO Box 1270, Newark, NJ 07101
Transaction ID: **SB21B.97473**

Image# 27930995392

Form/Schedule: **SD10** Disputed charge on May American Express bill. Credit issued in June, 2007.

Transaction ID: **SD10.97416**
